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COMMISSIONER FOR PATENTS

UNITED STATES PATENT AND TRADEMARK OFFICE

WASHINGTON, D.C. 20231

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Bib Data Sheet

2005-1461

CONFIRMATION NO. 6042

SERIAL NUMBER 10/010,412	FILING DATE 12/07/2001 RULE	CLASS 700	GROUP ART UNIT 2125	ATTORNEY DOCKET NO. AMDA.499C1 (TT4002/03C1)
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APPLICANTS

Russel Shirley, Pflugerville, TX;

Michael R. Conboy, Austin, TX;

Horace Paul Bowser JR., Austin, TX;

** CONTINUING DATA *****

This application is a CON of 09/665,646 09/19/2000 PAT 6,351,684

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/26/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	TX	4	15	3

ADDRESS

Attention of: Robert J. Crawford
CRAWFORD PLLC
Suite 390
1270 Northland Drive
St. Paul , MN
55120

TITLE

Mask identification database server

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
RECEIVED		



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CONFIRMATION NO. 6042

SERIAL NUMBER 10/010,412	FILING DATE 12/07/2001 RULE	CLASS 700	GROUP ART UNIT 2121	ATTORNEY DOCKET NO. AMDA.499C1 (TT4002/03C1)
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APPLICANTS

Russel Shirley, Pflugerville, TX;
Michael R. Conboy, Austin, TX;
Horace Paul Bowser JR., Austin, TX;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF 09/665,646 09/19/2000

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 12/26/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature _____ Initials _____		
STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3

ADDRESS

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CRAWFORD PLLC
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1270 Northland Drive
St. Paul , MN 55120

TITLE

Mask identification database server

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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